

ENVIRONMENTAL HEALTH SPECIALIST TRAINEE CERTIFICATION/REGISTRATION

1. Complete this application and return with nonrefundable \$73.00 check or money order payable to the STATE DEPARTMENT OF HEALTH SERVICES (*no cash*). This fee is in effect through December 31, 2002. This form is invalid after December 31, 2002.
2. Submit official college transcripts from **all** schools attended (*may be student-issued official transcripts*).
3. All information is mandatory in order to enable final determination of applicant's eligibility as an Environmental Health Specialist Trainee. The results of the evaluation will be mailed to you approximately one month after receipt of all required documentation.
4. SEND TO: STATE OF CALIFORNIA, DEPARTMENT OF HEALTH SERVICES, ENVIRONMENTAL HEALTH SPECIALIST REGISTRATION PROGRAM, MS396, P.O. BOX 942732, SACRAMENTO, CA 94234-7320, Telephone: (916) 324-8819.
5. This application will be valid for 30 months, after which reactivation will be necessary.
6. PLEASE NOTIFY THIS OFFICE OF ANY ADDRESS CHANGE. PLEASE PRINT OR TYPE.

<i>Signature</i>	<i>Date</i>
<p>The information is requested by the State Department of Health Services (DHS) by the authority of the Health and Safety Code, Sections 106600, 106735. This information is mandatory and will enable DHS to determine if the applicant meets the educational requirements. Failure to submit the necessary information will result in the denial of the application. No Interagency or Intergovernmental transfers of this information will be made. For more information or access to your records, contact the Department of Health Services, Environmental Health Specialist Registration Program, MS396, P.O. Box 942732, Sacramento, CA 94234-7320, (916)324-8819.</p>	
<p>EH 4 (2/02)</p>	